

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | pw | | 11-23-01 |
| O.I.P.E. CLASSIFIER | | 13 | 13/10/01 |
| FORMALITY REVIEW | H-T | 913 | 12/03/01 |
| RESPONSE FORMALITY REVIEW | | | |

BEST AVAILABLE COPY

INDEX OF CLAIMS

| | | | |
|---------------------|------------|---|--------------|
| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| — (Through numeral) | Canceled | A | Appeal |
| ÷ | Restricted | O | Objected |

| Claim | Date |
|----------|---------|
| Final | |
| Original | |
| 3 | 5/10/01 |
| 4 | 5/15/01 |
| 5 | 5/16/01 |
| 6 | 5/17/01 |
| 7 | 5/18/01 |
| 8 | 5/19/01 |
| 9 | |
| 10 | |
| 11 | |
| 12 | 5/22/01 |
| 13 | N |
| 14 | 5/23/01 |
| 15 | 5/24/01 |
| 16 | 5/25/01 |
| 17 | N |
| 18 | 5/26/01 |
| 19 | |
| 20 | |
| 21 | |
| 22 | 5/29/01 |
| 23 | N |
| 24 | 5/30/01 |
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| Claim | Date |
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| Final | |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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L.C. 859
12/14
12/23/01